



Dear Chair Greenlick, Vice-chairs Hayden and Nosse and members of the committee,

Thank you, for the opportunity to provide testimony in support of HB 3276 and the proposed -1 amendment. Oregon AFSCME Council 75 represents local public health workers in counties around the state. Our members are on the frontlines of providing critical services that protect and improve the health of all people in Oregon. I say “all people in Oregon” because public health emergencies don’t know the difference between citizens and visitors, or political boundaries.

One component of the critical services public health offers is being able to provide people with clinical services, especially during outbreaks of preventable and treatable diseases. In times of epidemic the role for local public health clinics and their partners become elevated to be able to meet the increased demand in services on the health care system. This means that local public health is handling vaccination and other treatments for people who may not be able to access their primary care, or other in-network insurance providers at a much higher volume than during times of non-epidemics. HB 3276 will help ensure that public health as well as community and pharmaceutical partners are able to provide prompt and equitable access to vaccinations and treatments by ensuring that insurance companies, including Coordinated Care Organizations cannot refuse reimbursement for these services.

In addition to reducing barriers for people to receive urgent preventative services, HB 3276 is a step in our public health modernization efforts. It will help strengthen cross jurisdictional public health work on communicable disease investigation and management, one of the four foundational programs of public health, through better coordination of services during outbreaks that cross county and other political boundaries.

AFSCME Council 75 urges your support of HB 3276.

Respectfully,

Eva RippetEAU
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